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CONFIRMATION NO. 9014

<b>SERIAL NUMBER</b> 10/666,722	<b>FILING OR 371(c) DATE</b> 09/18/2003 <b>RULE</b>	<b>CLASS</b> 514	<b>GROUP ART UNIT</b> 1614	<b>ATTORNEY DOCKET NO.</b> AM101032
<b>APPLICANTS</b> Lee Martin Greenberger, Montclair, NJ; Frank Loganzo JR., New City, NY; Carolyn Mary Discafani-Marro, Cortlandt Manor, NY; Arie Zask, New York, NY; Semiramis Ayrat-Kaloustian, Tarrytown, NY;				
<b>** CONTINUING DATA *****</b> This appln claims benefit of 60/411,883 09/20/2002				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 01/07/2004				
Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature <i>[Signature]</i> Initials <i>79B</i>	<b>STATE OR COUNTRY</b> NJ	<b>SHEETS DRAWING</b> 1	<b>TOTAL CLAIMS</b> 81
<b>INDEPENDENT CLAIMS</b> 6				
<b>ADDRESS</b> 25291				
<b>TITLE</b> Method of treating resistant tumors				
<b>FILING FEE RECEIVED</b> 2100	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	